

UNITED STATES DISTRICT COURT

for the

2023 MAY -3 AM 11:09

District of _____

DEPUTY CLERK *[Signature]*

Division

MARIALINA T. TILLMAN

Case No.

4 - 23 CV - 443 - P

(to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

AMERICREDIT FINANCIAL SERVICES, INC. dba GM
FINANCIAL SERVICESJury Trial: (check one) Yes No*Defendant(s)*

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

COMPLAINT FOR A CIVIL CASE**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	MARIALINA T. TILLMAN
Street Address	8525 SPRINGMONT LANE, APT 24301
City and County	FORT WORTH, TARRANT
State and Zip Code	TEXAS 76244
Telephone Number	(757)663-8152
E-mail Address	MARLITILLMAN@GMAIL.COM

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (*if known*). Attach additional pages if needed.

Defendant No. 1

Name	<u>AMERICREDIT FINANCIAL SERVICES, INC., GM FINANCIAL</u>
Job or Title (<i>if known</i>)	
Street Address	<u>801 CHERRY ST. #3500</u>
City and County	<u>FORT WORTH, TARRANT</u>
State and Zip Code	<u>TEXAS</u>
Telephone Number	<u>76102</u>
E-mail Address (<i>if known</i>)	

Defendant No. 2

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

Defendant No. 3

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

Defendant No. 4

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (*check all that apply*)

- Federal question Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

- (SCRA), 50 U.S.C. § 3901, et seq.
(FCRA), § (a)
(1)(A), § (a)(1)(B), (a)(7)(A)(i)

B. If the Basis for Jurisdiction Is Diversity of Citizenship**1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, (name) MARIALINA T. TILLMAN, is a citizen of the
State of (name) TEXAS.

b. If the plaintiff is a corporation

The plaintiff, (name) _____, is incorporated
under the laws of the State of (name) _____,
and has its principal place of business in the State of (name)
_____.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

2. The Defendant(s)**a. If the defendant is an individual**

The defendant, (name) _____, is a citizen of
the State of (name) _____. Or is a citizen of
(foreign nation) _____.

b. If the defendant is a corporation

The defendant, (*name*) AMERICREDIT FINANCIAL SERVICES, is incorporated under the laws of the State of (*name*) TEXAS, and has its

principal place of business in the State of (*name*) TEXAS.

Or is incorporated under the laws of (*foreign nation*) _____,

and has its principal place of business in (*name*) _____.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (*explain*):

250,000.00

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

GM FINANCIAL HAS FAILED TO PROVIDE MONTHLY BILLING STATEMENT FOR OVER ONE YEAR, AND WAS DENIED FURTHER ACCESS TO ONLINE BILLING, AFTER CONTINUAL ATTEMPTS TO RETRIEVE THOSE STATEMENTS, THROUGH TECHNICAL AND CUSTOMER SUPPORT. DESPITE OF TIMELY CAR PAYMENTS GM FINANCIAL HAS MADE FALSE REPORTS OF LATE CAR PAYMENTS TO CREDIT REPORT. CREDITOR HAS ATTEMPTED TO REPOSSES VEHICLE ON MULTIPLE OCCASIONS, WITH KNOWLEDGE OF ACTIVE DUTY ORDERS.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

- 1.) Illegally repossessing a service-member's
motor vehicle leased or owned by SCRA-protected service-members without obtaining court orders.
- 2.) the creditor's failure to mail or deliver a periodic statement to the consumer's last known address
- 3.) Defendant's refusal to allow access to Plaintiffs on-line bill.

Violation of Code of Federal Regulations (CFR) §1026.13 (a)(6)

4.) Fair Credit Reporting Act (FCRA), § (a)

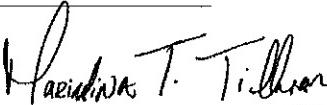
(1)(A), § (a)(1)(B), (a)(7)(A)(i) for, (a) knowingly making false reports of late payments to Equifax, Experian, and Transunion credit bureaus, (b) continually reporting false information in lieu of the Plaintiff's dispute of negative information in writing, and (c) Defendants failure to provide notice to Plaintiff of negative information reported to credit bureaus.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 05/01/2023Signature of Plaintiff Printed Name of Plaintiff Marialina T. Tillman**B. For Attorneys**

Date of signing: _____

Signature of Attorney _____

Printed Name of Attorney _____

Bar Number _____

Name of Law Firm _____

Street Address _____

State and Zip Code _____

Telephone Number _____

E-mail Address _____

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The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

I. (a) PLAINTIFFS

MariaLina T. Tillman

(b) County of Residence of First Listed Plaintiff Tarrant
(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)

PRO SE

II. BASIS OF JURISDICTION *(Place an "X" in One Box Only)*

- | | |
|--|--|
| <input type="checkbox"/> 1 U.S. Government Plaintiff | <input type="checkbox"/> 3 Federal Question
<i>(U.S. Government Not a Party)</i> |
| <input type="checkbox"/> 2 U.S. Government Defendant | <input type="checkbox"/> 4 Diversity
<i>(Indicate Citizenship of Parties in Item III)</i> |

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff
(For Diversity Cases Only) and One Box for Defendant)

	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 1	Incorporated or Principal Place of Business In This State	<input type="checkbox"/> 4	<input checked="" type="checkbox"/> 4
Citizen of This State					
Citizen of Another State	<input type="checkbox"/> 2	<input type="checkbox"/> 2	Incorporated and Principal Place of Business In Another State	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Citizen or Subject of a Foreign Country	<input type="checkbox"/> 3	<input type="checkbox"/> 3	Foreign Nation	<input type="checkbox"/> 6	<input type="checkbox"/> 6

IV. NATURE OF SUIT (*Please put "X" in One Box Only*)

[Click here for: Nature of Suit Code Descriptions.](#)

V. ORIGIN (*Place an "X" in One Box Only*)

- 1 Original Proceeding 2 Removed from State Court 3 Remanded from Appellate Court 4 Reinstated or Reopened 5 Transferred from Another District (specify) 6 Multidistrict Litigation - Transfer 8 Multidistrict Litigation - Direct File

Cite the U.S. Civil Statute under which you are filing (*Do not cite jurisdictional statutes unless diversity*)
SERVICEMEMBERS CIVIL RELIEF ACT, FAIR CREDIT REPORTING ACT

VI. CAUSE OF ACTION

Brief description of cause:

ATTEMPT TO REPOSESS VEHICLE WHILE ON A/D ORDERS, FAILURE TO PROVIDE MONTHLY STATEMENT, FALSE CREDIT REPORTING

**VII. REQUESTED IN
COMPLAINT:**

- 15 •

JUDGE

DOCKET NUMBER

DATE

~~SIGNATURE OF ATTORNEY OR FIRM~~

5/1/2023 PRO SE

FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IEP

JUDGE

MAG. JUDGE